



**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

07/12/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NJD986601128

INSTALLATION NAME: A M AUTO CENTER

**INSTALLATION ADDRESS : 1144 SOUTH AVE
WESTFIELD, NJ 07090**

**MAILING ADDRESS : 1144 SOUTH AVE
WESTFIELD, NJ 07090**

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: A M AUTO CENTER
or Current Occupant
ATTN: JOHN MORMILE
1144 SOUTH AVE
WESTFIELD, NJ 07090**

Operator

006 JUN 12 PM 4:45

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>5 Rumson Road</u>	
	City, Town, or Village: <u>Rumson</u>	
	State: <u>NJ</u>	
	Country: <u>USA</u>	Zip Code: <u>07760</u>

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

☒ Y • ☐ N • ☒ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

- a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- ☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

☐ Y • ☐ N • ☒ d. United States Importer of Hazardous Waste☐ Y • ☐ N • ☒ e. Mixed Waste (hazardous and radioactive) Generator☐ Y • ☐ N • ☒ 2. Transporter of Hazardous Waste☐ Y • ☐ N • ☒ 3. Treater, Storer, or Disposer of

Hazardous Waste (at your site) Note:

A hazardous waste permit is required for this activity.

☐ Y • ☐ N • ☒ 4. Recycler of Hazardous Waste (at your site)☐ Y • ☐ N • ☒ 5. Exempt Boiler and/or Industrial Furnace

If "Yes", mark each that applies.

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, and Refining Furnace Exemption

☐ Y • ☐ N • ☒ 6. Underground Injection Control

B. Universal Waste Activities

- ☐ Y • ☐ N • ☒ 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. If "Yes", mark all boxes that apply:

	Generate	Accumulate
a. Batteries	••	••
b. Pesticides	••	••
c. Thermostats	••	••
d. Lamps	••	••
e. Other (specify) _____	••	••
f. Other (specify) _____	••	••
g. Other (specify) _____	••	••

☐ Y • ☐ N • ☒ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

- ☐ Y • ☐ N • ☒ 1. Used Oil Transporter
If "Yes", mark each that applies.
- a. Transporter
 - b. Transfer Facility

- ☐ Y • ☐ N • ☒ 2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.
- a. Processor
 - b. Re-refiner

☐ Y • ☐ N • ☒ 3. Off-Specification Used Oil Burner☐ Y • ☐ N • ☒ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001						

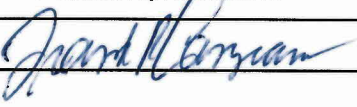
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

Previous EPA ID No. assigned to Maplecrest Service Station at this address. Present operations under supervision of same owner, with new operator.

Reactivating ID No. in order to dispose of contaminated groundwater currently stored in 55-gallon drums and associated with a NJDEP investigation from former underground storage tanks. No other wastes are generated.

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	FRANK LANZANI	5-20-06

ENVIRONMENTAL PROTECTION
AGENCY REGION II

06 MAY 26 AM 10:55

DIV. ENV. PLNG. & PROT.

Carol McGowan Frank



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

03/18/91

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->	NJD986601128
FACILITY NAME ->	MAPLECREST SERVICE CENTER
MAILING ADDRESS ->	1144 SOUTH AVE WESTFIELD, NJ 07090
INSTALLATION ADDRESS ->	1144 SOUTH AVE WESTFIELD, NJ 07090

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278
ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: LANZIANO FRANK
MAPLECREST SERVICE CENTER
1144 SOUTH AVE
WESTFIELD, NJ 07090



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY

03/18/91

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EPA I.D. NUMBER -> NJD986601128

FACILITY NAME -> MAPLECREST SERVICE CENTER C/O

MAILING ADDRESS -> 1144 SOUTH AVE
WESTFIELD, NJ 07090

INSTALLATION ADDRESS -> 1144 SOUTH AVE
WESTFIELD, NJ 07090

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: LANZIANO FRANK
MAPLECREST SERVICE CENTER
1144 SOUTH AVE
WESTFIELD, NJ 07090

PERMITS ADMINISTRATION
BRANCH
91 APR -8 PM 2:47

NEW YORK, N.Y.
REGION II
ENVIRONMENTAL PROTECTION AGENCY

Phone: 908 731 2711

HWF-REGION* 02
HWF-STATE* NJ
HWF-ID* NJD986601128

HWF-OWNER-TYPE* P
HWF-FAC-NAME* MAPLECREST SERVICE CENTER
HWF-KONTACT* LANZIANO FRANK
HWF-MAIL-STREET* 1144 SOUTH AVE
HWF-MAIL-CITY* WESTFIELD
HWF-MAIL-STATE* NJ
HWF-MAIL-ZIP* 07090
HWF-FAC-STREET* 1144 SOUTH AVE
HWF-FAC-CITY* WESTFIELD
HWF-FAC-ZIP* 07090
HWF-FAC-PHONE* 9087312711 201-812-0313
HWF-COUNTY* 039
HWF-COUNTY-NAME* UNION
HWF-GEN* 1
HWF-OWNER-NAME* FRANK LANZIANO
HWF-REGION-ELEMENT02* B
HWF-LAST-UPDATE* 03/18/1991

HWF-D* X

HWF-WASTE-CODE* D000

HWF-WASTE-CODE* D018

HWF-NOTIF-RECPT-DATE* 01/29/1991

HWF-NOTIF-ACKMT-DATE* 03/18/1991

Mailing address

9 Frasco Lane

Norwood, NJ 07648

Betsy -

I called Frank Lanziano
on 6/20/91, he mailing
address is 9 Frasco

Lane

Norwood, NJ

07648.

He sold the business.
No longer works at
1144 South Ave.

9 Frasco
Norwood, NJ 07648

David -

Please take care of
these documents.

David

30-4012

IN STATE

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Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

Comments

[illegible]

Installation's EPA ID Number										Approved			Date Received (yr. mo. day)			039								
C	N	J	D	9	8	6	6	0	1	1	2	8	T/A	C				9	1	0	1	2	9	Union
F														1										

[illegible]

Street or P.O. Box

[illegible]

City or Town															State		ZIP Code			
C																				
4	W	E	S	T	F	I	E	L	D							N	J	0	7	0

Street or Route Number

[illegible]

City or Town															State		ZIP Code							
C																								
6	W	E	S	T	F	I	E	L	D									N	J	0	7	0	9	0

Name and Title (last, first, and job title)

C	Name and last, first, middle, and job title															Phone Number (area code and number)																													
2	F	R	A	N	K											L	A	N	Z	I	A	N	O											9	0	8		7	3	1		2	7	1	1

A. Name of Installation's Legal Owner

C	A. Name of Installation's Legal Owner												B. Type of Ownership (enter code)		
R	F	R	A	N	K	L	A	N	Z	I	A	N	O		P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
<input checked="" type="checkbox"/> 1a. Generator <input type="checkbox"/> 2. Transporter <input type="checkbox"/> 3. Treater/Storer/Disposer <input type="checkbox"/> 4. Underground Injection <input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel <i>(enter 'X' and mark appropriate boxes below)</i> <div style="margin-left: 20px;"> <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner </div>	<input type="checkbox"/> 1b. Less than 1,000 kg/mo.	<input type="checkbox"/> 6. Off-Specification Used Oil Fuel <i>(enter 'X' and mark appropriate boxes below)</i> <div style="margin-left: 20px;"> <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner </div>	<input type="checkbox"/> 7. Specification Used Oil Fuel Marketer <i>(or On site Burner)</i> Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

VIII. Mode of Transportation *(transporters only — enter 'X' in the appropriate box(es))*

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify) _____

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒ A. First Notification
 ☐ B. Subsequent Notification (*complete item C*)

ID — For Official Use Only

C																		T/A	C
W																			1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☒ 4. Toxic
(D000) **Benzene (D018)**
XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Name and Official Title (type or print)

Date Signed



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09/03/91

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EPA I.D. NUMBER ->	NJD986601128
FACILITY NAME ->	MAPLECREST SERVICE CENTER
MAILING ADDRESS ->	9 FRASCO LANE NORWOOD, NJ 07648
INSTALLATION ADDRESS ->	1144 SOUTH AVE WESTFIELD, NJ 07090

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: LANZIANO FRANK
MAPLECREST SERVICE CENTER
9 FRASCO LANE
NORWOOD, NJ 07648

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 3, 2015 - 3:21 PM

Version 5.0

User Selection Criteria

Location:	New Jersey, all activities	Activity Location:	None Chosen
Handler ID:	NJD986601128	Group of IDs:	None Chosen
Handler Name:			
Handler Universe:	All Facilities Regardless of Universe		
Determined Date Range:	From: 10/01/1980 To: 12/03/2015		
Location County Code:	None Chosen	Evaluation Type:	
Location City:		Focus Area:	
Location Zip Code:		Violation Type:	
State District:	None Chosen	Display Code Descrip.:	Yes
Sort Order:	Region, State, Handler Name	Display Universes:	Yes

Results

Data meeting the criteria you selected follows.

Total Pages: 4 Total Handlers: 1

Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

Report Information

Name: cme_foia.rdf
Developed by: EPA Headquarters, Office of Enforcement and Compliance Assurance
Deployed: June 2006
Last Updated: May 2012
Contact: rcrainfo.help@epa.gov
Tables Used: cmecomp3, ccitation3, hreport_univ5, lu_citation, lu_state, hid_groups
Libraries: none

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 3, 2015 - 3:21 PM

Page 2

A M AUTO CENTER

County Name / Code: UNION / NJ039

NJD986601128

Location: 1144 SOUTH AVE; WESTFIELD, NJ 07090

REGION 02

Mailing: 1144 SOUTH AVE; WESTFIELD, NJ 07090

Activity Location: NJ		State District: CENTRAL		Accessibility:		Non-Notifier:		Extract Flag: Y		Active Site: N	
Generator:	N	Transporter:	N	Operating TSDF:	-----	IC In Place:	N	El Indicator (HE / GW):	N / N		
Short-Term Gen:	N	Transfer Facility:	N	Offsite Receiver:	N	HSM:	N	Subpart K:	---		
Full Enforcement:	-----	Converter:	-----	State Unaddressed SNC:	N	EPA Unaddressed SNC:	N				
CA Wrkld:	N	State TSDF:	-----	State Addressed SNC:	N	EPA Addressed SNC:	N				
Active State Gen:	N			State SNC w/Comp Sched:	N	EPA SNC w/Comp Sched:	N				

Evaluations With No Violations:

CAV Evaluation	02/29/2008	Activity Location: NJ	By: State	Identifier: 001	Person: COMLE	Branch: C	Found Violation: NO
Citizen Complaint: NO		Multimedia Inspection: YES	Sampling: NO	Not Subtitle C: NO	Day Zero: 02/29/2008	Focus Area:	

Total Number of Handlers: 1

Total Number of Activity Locations: 1

* End of Report *

* Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 3, 2015 - 3:21 PM

Page 3

Description of codes used on the report:

Universes	Description of Universes
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
IC in Place	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
EI Indicator (HE / GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Short-Term Gen	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
Transfer Facility	Indicates that the facility transfers hazardous waste.
Offsite Receiver	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
HSM	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
Subpart K	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
Full Enforcement	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
Active State Gen	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
Converter	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State TSDF	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State Unaddressed SNC	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State Addressed SNC	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State SNC w/ Compl. Sched	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
EPA Unaddressed SNC	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA Addressed SNC	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA SNC w/ Compl. Sched	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

* Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 3, 2015 - 3:21 PM

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Description of codes used on the report:

ACCESSIBILITY - indicates the reason why the handler is not accessible for normal RCRA tracking and processing (previously called Bankrupt Indicator):	
Code	Description
B	indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.
C	indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent.
F	indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.
L	indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.

NON-NOTIFIER - indicates that the handler has been identified through a source other than Notification and is suspected of conducting RCRA-regulated activities without proper authority:	
Code	Description
E	indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify.
O	indicates that the handler is a former non-notifier.
X	indicates that the handler is a non-notifier.

Evaluation Type	Type Description
CAV	COMPLIANCE ASSISTANCE VISIT

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